

Clerk stamps below when form is filed.

1 Name of person who asked for the order (protected person):
_____**2** Your name: _____Your address (*skip this if you have a lawyer*): (*If you want your address to be private, give a mailing address instead*):

City: _____ State: _____ Zip: _____

Your phone # (*optional*): (_____) _____Your lawyer (*if you have one*): (*Name, address, phone #, and State Bar #*):

Court name and street address:

Superior Court of California, County of

_____**Case Number:**

_____**Give the judge your answers to DV-100:****3** ☐ **Personal Conduct Orders**I ☐ do ☐ do not agree to the order requested.**4** ☐ **Stay-Away Order**I ☐ do ☐ do not agree to the order requested.**5** ☐ **Move-Out Order**I ☐ do ☐ do not agree to the order requested.**6** ☐ **Child Custody**a. I ☐ do ☐ do not agree to the custody order requested.b. ☐ I am not the parent of the child(ren) listed in DV-105.c. ☐ I ask for the following custody order (*specify*): _____

_____**7** ☐ **Visitation**a. I ☐ do ☐ do not agree to the visitation order requested.b. ☐ I ask for the following visitation order (*specify*): _____

_____**8** ☐ **Child Support**a. I ☐ do ☐ do not agree to the order requested.b. ☐ I agree to pay guideline child support.*You must fill out, serve, and file Form FL-150 or FL-155.***9** ☐ **Record Unlawful Communications**I ☐ do ☐ do not agree to the order requested.

The judge can consider your Answer at the hearing. Write your hearing date and time here:

**Hearing
Date** →

Date: _____ Time: _____

Dept.: _____ Room: _____

You must obey the orders until the hearing.

If you do not come to this hearing, the judge can make the orders last for 3 years or longer.

Your name: _____

10 ☐ **Property Control**I ☐ do ☐ do not agree to the order requested.*If you have other requests, list them in 19 below.***11** ☐ **Debt Payment**I ☐ do ☐ do not agree to the order requested.*If you have other requests, list them in 19 below.***12** ☐ **Property Restraint**I ☐ do ☐ do not agree to the order requested.*If you have other requests, list them in 19 below.***13** ☐ **Attorney Fees and Costs**I ☐ do ☐ do not agree to the order requested.**14** ☐ **Payments for Costs and Services**I ☐ do ☐ do not agree to the order requested.**15** ☐ **Batterer Intervention Program**I ☐ do ☐ do not agree to the order requested.**16** ☐ **Other Orders** (see Item 19 on Form DV-100)I ☐ do ☐ do not agree to the order requested.**17** ☐ **Turn in Guns or Other Firearms**a. ☐ I do not own or have any guns or firearms.b. ☐ I ☐ do ☐ do not agree to the order requested.c. ☐ I ☐ have ☐ have not turned in my guns to the police or licensed gun dealer.d. ☐ A copy of the receipt ☐ is attached. ☐ has already been filed with the court.*You must file a receipt with the court within 72 hours after receiving DV-110.***18** ☐ **I ask the court to order payment of my**a. ☐ Attorney feesb. ☐ Out-of-pocket expenses because the temporary restraining order was issued without enough supporting facts. The expenses are:

Item: _____ Amount: \$ _____ Item: _____ Amount: \$ _____

*You must fill out, serve, and file Form FL-150.***19** ☐ **My answer to the statements in DV-100 and other requests***Please attach your statement. Write "DV-120, Item 19 — More Information" at the top. Be specific.***20** I declare under penalty of perjury under the laws of the State of California that the information above is true and correct.

Date: _____

Type or print your name_____
Sign your name